FORM D

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION :Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

OMB AP	PROVAL				
OMB Number: 3235-0076					
Expires: April 30, 2008					
Estimated average burden					
houre per response	16.00				

SEC USE ONLY							
Prefix			Serial				
	1	- 1					
DATE RECEIVED							
	1	1					

Name of Offering (check if this is an amendment and r	name has changed, and indicate change.)	
Sale of Series A Preferred Stock and Warrants to Purchase S	Series A Preferred Stock	<u></u>
Filing Under (Check box(es) that apply): Rule 504	☐ Rule 505 ☐ Rule 506 ☐	Section 4(6) ULOE
Type of Filing: New filing Amendment		_
Type of Fining. Thew Ining		
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer.		
Name of Issuer (check if this is an amendment and nam	ne has changed, and indicate change	
	ne nas enangen, and maience enange.)	
Clupedia Corporation	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Address of Executive Offices	(Number and Street, City, State, 21p Code)	(949) 861-2341
1300 S. Bristol Street, Santa Ana, California 92704-3424		(943) 001-2341
	07 3 10 10 0 17 0 13	7-1
Address of Principal Business Operations	(Number and Street, City, State, Zip Code)	Tek
(if different from Executive Offices)	/ PROCESSED	<u> </u>
	/ NOOLON LD	
Brief Description of Business	1//	
	\\\ JUL 2 0 2007	07071630
Internet content and service provider	111 /	
Type of Business Organization	HOMSON_	
orporation limite	ed partnership, already FINANCIAL Of	her (please specify):
	ed partnership, to be formed	
	Month Year	
Actual or Estimated Date of Incorporation or Organization:	October 2006	
Jurisdiction of Incorporation of Organization: (Enter two-le	etter U.S. Postal Service abbreviation for State:	DE
	r; FN for other foreign jurisdiction)	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are

SEC 1972 (6-02)

not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer: Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. ⊠ Beneficial Owner □ Executive Officer □ Director ☐ General and/or Check Box(es) that Apply: Promoter Managing Partner Saad, David Full Name (Last name first, if individual) 1300 S. Bristol Street, Santa Ana, CA 92704-3424 Business or Residence Address (Number and Street, City, State, Zip Code) □ Executive Officer ☐ General and/or Check Box(es) that Apply: Promoter ■ Beneficial Owner □ Director Managing Partner Seraphim Fund I, LLC Full Name (Last name first, if individual) PMB 646, 3972 Barranca Parkway, #J, Irvine, CA 92606 Business or Residence Address (Number and Street, City, State, Zip Code) ☐ General and/or ☐ Beneficial Owner □ Executive Officer □ Director Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ■ Beneficial Owner □ Executive Officer □ Director ☐ General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ General and/or □ Executive Officer □ Director Check Box(es) that Apply: Promoter ☐ Beneficial Owner Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Executive Officer □ Director ☐ General and/or Check Box(es) that Apply: Promoter ☐ Beneficial Owner Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

1. 1	las the issu	er sold, or	does the is	suer intend	to sell, to r	on-accredi	ited invest	ors in this	offering?	• • • • • • • • • • • • • • • • • • • •	•••••		🔲	\boxtimes
Answer also in Appendix, Column 2, if filing under ULOE.								Issu	ar'c					
2. What is the minimum investment that will be accepted from any individual?														
3. Does the offering permit joint ownership of a single unit?							⊠							
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual)														
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Buşir	ess or Kesi	ience Add	iress (Num	per and Sire	et, City, St	ate, Zip Co	xie)							
Name	of Associa	ted Broke	r or Dealer									•		
States	in which P	erson List	ed Has Sol	icited or In	tends to So	licit Purcha	ısers							
	k "All State												All States	
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full !	Name (Last	name first	, if individ	ual)										
Busir	ess or Resid	dence Add	Iress (Num	ber and Stre	et City St	ate. Zin Co	ode)							
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Name	of Associa	ted Broke	r or Dealer											
	in which P				tends to So				***,				All States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]		
(IL) [MT] [RI)	[IN] [NE]	[IA] [NV]	[KS] [NH]	[KY] [NJ] [TX]	[LA] [NM] [UT]	(ME) [NY] [VT]	(MD) [NC] [VA]	[MA] [ND] [WA]	[MI] [OH]	[MN] [OK]	[MS] [OR] [WY]	[MO] [PA] [PR]		
	[SC]	[SD] name first	(TN) , if individ			[[V 1]	[VA]		[WV]	[WI]	[[[]	[FK]		
Busir	ess or Resid	dence Add	lress (Num	ber and Stre	eet, City, St	ate, Zip Co	ode)							
Name	of Associa	ted Broke	r or Dealer	<u> </u>										
States	in which P	erson List	ed Has Sol	icited or In	tends to So	licit Purcha	isers		_					
(Check "All States" or check individual States														
[AL] [IL]	(AK) [IN]	[AZ] [IA]	[AR] [KS]	[CA] [KY]	[CO] [LA]	[CT] [ME]	[DE] [MD]	[DC] [MA]	[FL] [MI]	[GA] [MN]	[HI] [MS]	[ID] [MO]		
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]		
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)														
DOC	SOC/12331	48v1/1004	113-0002				3							

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS						
	b. Enter the difference between the aggregate of and total expenses furnished in response to Part C proceeds to the issuer."	\$	\$ <u>892,630</u>				
5.	Indicate below the amount of the adjusted gross of for each of the purposes shown. If the amount for and check the box to the left of the estimate. Adjusted gross proceeds to the issuer set forth in respectively.						
		Payments to Officers Directors, & Affiliates		Payments to Others			
	Salaries and fees			\$		\$	
	Purchase of real estate			\$		\$	
	Purchase, rental or leasing and installation of mach	hinery and equipment		\$		\$	
	Construction or leasing of plant buildings and faci		\$		\$		
	Acquisition of other businesses (including the value offering that may be used in exchange for the asset issuer pursuant to a merger)		\$		\$		
	Repayment of indebtedness			\$		\$	
	Working capital			\$	\boxtimes	\$ <u>892,630</u>	
	Other (specify):			\$		\$	
	Column Totals			\$		\$ <u>892,630</u>	
	Total Payments Listed (column totals added)	⊠ \$ <u>8</u>	92,630				
		D. FEDERAL SIGNATURE		•			
The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.							
Isst	er (Print or Type)	Signature	, 	Date			
	Clupedia Corporation .				11,	2007	
Naı	ne of Signer (Print or Type)	Title of Signer (Print or Type)					
Da	id Saad	Chief Executive Officer					
				C			
			70				

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)